

## “If prophylaxis is that great, then I'll treat myself to it more than once a year!”: Positive patient reactions after a year of Guided Biofilm Therapy (GBT)

A year ago, the Mattiola & Partner AG dental practice in Wohlen in the canton of Aargau switched its prophylaxis to Guided Biofilm Therapy (GBT) from EMS, Switzerland, and is now GBT certified. The owner of the practice, Dr. Alessandro Mattiola, and dental hygienist Alexandra Weber talk to us about their experiences with the new system, barriers to the changeover, and patient satisfaction with GBT.

Photo: Dr. Mattiola & Partner AG dental practice



**Dr. Mattiola, practice owner, and Ms. Weber, DH, proudly display the GBT certification of their practice from EMS. The certification of their practice is important to them to demonstrate to their patients that they actively engage with the issue of prophylaxis and have undergone GBT training.**

*In Switzerland dental treatment is a private matter: Most treatments must be paid for out of patients' own pockets, while in Germany, for example, basic dental care is covered by statutory health insurance. To what extent does the private payment system in Switzerland affect people's attitude to dental prophylaxis?*

**Dr. Alessandro Mattiola:** The Swiss system encourages personal responsibility and a positive attitude to prophylaxis. This is because prophylaxis is an economical means of avoiding dental treatments, such as restorations, that are expensive in the long term. Patient compliance also increases when they see the impact on their own finances. This may well be why oral hygiene is so good in Switzerland.

*You manage a modern practice offering a wide range of treatments. What importance does prophylaxis have specifically for you?*

**Dr. Mattiola:** We consider prophylaxis to be the foundation of every treatment. It really can be described as: a high level of oral hygiene in our patients is the basis for good oral health.

When that is achieved, a great deal has been won already. When it isn't achieved, dental treatments and reconstructions will not function in the long term. When the foundation is not there, then we are building houses on sand.

**DH Weber:** Our patients also have to know this: I explain to them often how important it is to remove biofilm to tackle the causes of the most common oral diseases.

*Prophylaxis is therefore very important in your practice. Why did you opt to switch to Guided Biofilm Therapy, GBT for short?*

**Dr. Mattiola:** There were several reasons. For one thing, the more efficient biofilm management: By using the AIRFLOW® we can also clean areas that are difficult to access, such as small pits and crevices between the teeth. This means we can also remove stains, particularly those in smokers that are otherwise almost impossible to remove. This is an obvious advantage. For patients GBT is very pleasant, not only for biofilm removal using the AIRFLOW® MAX but also for calculus management using the PIEZON® PS instrument from EMS. That was the second reason—and there is a third: Dental hygiene is backbreaking work. Many dental hygienists therefore do not want to work full time. It is a punishing task if you really aim for a clean result! The EMS instruments reduce the energy needed for the work and make the routine work of dental hygienists so much easier. After all, I would like to keep my dental hygienists until they retire! (laughs)

*Ms. Weber, does GBT make your life easier?*

Yes, absolutely. Removing stains was a huge battle for me in the past. With GBT it is much, much better. My posture at work is also more comfortable.

*Which instruments do you use for GBT and which powder do you use?*

**DH Weber:** We use the AIRFLOW® Prophylaxis Master (AFPM) from EMS and we only work with PLUS powder. Only very heavy staining is removed with the CLASSIC Comfort Powder. The workflow for a prophylaxis visit follows the eight steps recommended to us by the manufacturer: First, assessment and disclosure, which gives me a road map for biofilm removal, so to speak.

This is followed by oral hygiene instruction and motivation and then I use the AIRFLOW® MAX to remove the biofilm. In those areas with calculus or difficult to reach spots, we use the PIEZON® PS ultrasonic scaler and also hand instruments in some cases. After the ultrasonic scaling in specific cases needed, I go over with PLUS powder because it gives a pleasant feeling. I then carry out a quality check and the next recall appointment is made.

**Dr. Mattiola:** For the recall, I place considerable importance on an interval between appointments appropriate for the individual patient. Patients should not simply be asked to come back every 6 months or once a year but we should determine what is appropriate as well as the manual options for the patient or their motivation for tooth cleaning.

*A year ago you introduced GBT into your practice. How have your patients reacted to the changeover?*

**Dr. Mattiola:** Most of our patients are happy. Because we hardly have to use hand instruments anymore, it is a relief for them.

**DH Weber:** Since the introduction a year ago, our patients are really enthusiastic; they find it much more comfortable and love it. I have even had people who have said: Yes, if it's that great, then I'll treat myself to it more than once a year!

**Dr. Mattiola:** But then we'd have a logistical problem ... *(laughs)*

*Do some patients miss the final polish with paste and rotary brush that is the norm?*

**DH Weber:** No one asks for a polish at the end of a prophylaxis visit any more because most patients have already come to the practice for the second or third time for GBT and are already familiar with the new system. Initially, patients did ask for a polish. I explained to them that we no longer polish with a rotary brush and paste because first, all polishing pastes are more abrasive than the PLUS powder, and second, the tooth surface after GBT is optimally smooth and deeply clean. I then ask patients to run their tongue over their teeth to check.

*Did the team undergo professional training for the introduction of GBT?*

**DH Weber:** Yes, a GBT trainer from the Swiss Dental Academy (SDA) of EMS came to our practice for a one-day training session (GBT clinical training) one Saturday. The knowledgeable GBT expert from EMS, Sami Ukshini, had previously demonstrated the equipment and its correct handling in detail. We defined the individual steps in a protocol that the team follows.

The trainer first explained to us the concept behind GBT. Then we could practice together. We simulated the workflow of a complete prophylaxis day:

What do we do after the prophylaxis? What do we do in the afternoons and evenings? We also had to learn how to use the instruments. For example, the mirror is integrated into the suction and so I have to know how to maneuver it. I found it interesting to feel how biofilm removal after GBT feels in my own mouth. Of course I was pleased that I also knew what I was going to be doing to my patients *(laughs)*. It is always the best experience to know yourself how something feels.

*Were there any obstacles to changing over to GBT?*

**Dr. Mattiola:** Yes, from my point of view there was. For some dental hygienists who have worked for years with a particular workflow, the change certainly presented a challenge. But now all our staff happily work with the new system. And that was our goal—some got there a little quicker than others, that's all.

**DH Weber:** For me, it was a positive change. Initially, I was a little skeptical because during my training as a dental hygienist I worked with an air polisher that caused problems almost every day. The nozzles blocked up or it malfunctioned for some other reason. But my fears were not justified.

*Has GBT also proved itself financially in your practice, Dr. Mattiola?*

**Dr. Mattiola:** We purchased three AIRFLOW® Prophylaxis Master units outright from EMS. This is already an investment and the powder is another cost factor. Because I know how tricky maintenance and care of air polishers is, it is very important for me that everyone in the team is well trained and cleans the instruments following clear guidelines. It would not pay off if these instruments malfunctioned often. But in the first year we have had absolutely no problems. The first year was great. Which is exactly how I had imagined it. After a year, the instruments need a service but that's the same as for a car. If the instruments then work perfectly again for another year, that's okay by me. From an economic point of view I would say on balance it's good!

Dr. med. dent. Alessandro Mattiola runs a modern, prophylaxis-oriented practice in Wohlen/Canton Aargau. Together with two employed dentists, he offers a broad range of treatments, including implant dentistry and oral surgery, laser treatments, and chairside restorations. Four dental hygienists carry out routine prophylaxis in the practice. The team also includes nine other employees as well as two trainees.

The practice is GBT certified.

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